

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Janet B. Morgan
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 27 PM 2:33

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

DOCUMENT # P93000068980 (0)

1. Corporation Name

FREEMAN & ROSS, P.A.

2. Principal Office Location

811 N. OLIVE AVENUE
WEST PALM BEACH FL 33401

3. Mailing Address

811 N. OLIVE AVENUE
WEST PALM BEACH FL 33401

(DO NOT WRITE IN THIS SPACE)

3. Date incorporated in Florida
10/04/1993

3a. Date of Last Report
04/26/1994

4. FEI Number

65-0438254 65-0500417

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Have corporation's fees liability for intangible tax under S. 199.03?

Florida Statutes

☐ Yes

☐ No

2. Principal Office Location

21. State, Apt. #, etc.

22. City, State

23. State, Apt. #, etc.

24. City, State

2b. Mailing Address

26. State, Apt. #, etc.

27. City, State

28. State, Apt. #, etc.

29. City, State

30. State, Apt. #, etc.

9. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES INC.
4521 PGA BLVD
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. State

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.074, and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0565, Florida Statutes.

SIGNATURE

12. Name of Agent (Print Name) (Typed Name) (Typed Name)

12. OFFICERS AND DIRECTORS

NAME
D
ROSS, ROBERT C
% 811 N. OLIVE AVENUE
WEST PALM BEACH FL 33401

NAME
D
FREEMAN, TERRY N
% 811 N. OLIVE AVENUE
WEST PALM BEACH FL 33401

NAME
D
FREEMAN, TERRY N
% 811 N. OLIVE AVENUE
WEST PALM BEACH FL 33401

NAME
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FREEMAN, TERRY N
% 811 N. OLIVE AVENUE
WEST PALM BEACH FL 33401

NAME
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FREEMAN, TERRY N
% 811 N. OLIVE AVENUE
WEST PALM BEACH FL 33401

NAME
D
FREEMAN, TERRY N
% 811 N. OLIVE AVENUE
WEST PALM BEACH FL 33401

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

13.1 NAME

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY

13.5 STATE

13.6 ZIP CODE

13.7 NAME

13.8 STREET ADDRESS

13.9 CITY

13.10 STATE

13.11 ZIP CODE

13.12 NAME

13.13 STREET ADDRESS

13.14 CITY

13.15 STATE

13.16 ZIP CODE

13.17 NAME

13.18 STREET ADDRESS

13.19 CITY

13.20 STATE

13.21 ZIP CODE

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY

13.25 STATE

13.26 ZIP CODE

13.27 NAME

13.28 STREET ADDRESS

13.29 CITY

13.30 STATE

13.31 ZIP CODE

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct, and that the corporation shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the secretary or another empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on the filing of this report.

SIGNATURE:

SIGNATURE

TYPE

NAME

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4/24/95 65-605
(407) CP